



South Carolina Department of Insurance

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MARK SANFORD
Governor

ELEANOR KITZMAN
Director of Insurance

APPOINTMENT OF THE DIRECTOR OF INSURANCE FOR THE STATE OF SOUTH CAROLINA AS ATTORNEY TO ACCEPT SERVICE OF PROCESS

KNOW ALL MEN BY THESE PRESENT, that _____, a captive duly organized under and by virtue of the laws of the State of _____, hereinafter called Captive, has made, constituted and appointed, and does hereby make, constitute and appoint the Director of Insurance of the State of South Carolina, and his successors in office, to be its true and lawful attorney upon whom all legal process in any action or proceeding against it shall be served and further agrees that any lawful process against it which is served upon such attorney shall be of the same legal force and validity as if served upon the Captive.

GIVING AND GRANTING UNTO THE SAID Director of Insurance for the State of South Carolina and his successors, full power and authority to do and perform every act and thing necessary and requisite to be done in and about the premises as fully to all intents and purposes as said Captive might or could do if personally present, hereby ratifying and confirming all that the said Director of Insurance shall lawfully do or cause to be done by this power granted to him and to them. This authority shall continue in full force and effect so long as any liability remains outstanding in this State. This instrument is executed pursuant to and shall be construed so as to constitute full compliance with, S.C. Code Ann. Section 38-5-70 (1976, as amended).

IN WITNESS WHEREOF, said Captive, in pursuance of a resolution duly adopted by its Board of Directors, has caused this instrument to be executed in its name by its President and its Secretary, and cause its corporate seal to be affixed at the City of _____, State of _____, this _____ day of _____, 20____.

Attest:

By: _____
PRESIDENT

By: _____
SECRETARY

NAME OF CAPTIVE

Over

STATE OF _____)

COUNTY OF _____)

This certifies that on the _____ day of _____, 20____, before the undersigned Notary Public in and for the said County and State, personally appeared the above-named _____, known to me to be the President, and _____, known to me to be the Secretary of _____, the Captive mentioned in and which executed the foregoing power of attorney, and severally acknowledged that they executed the same by authority and in behalf of the Captive, pursuant to a resolution of the Board of Directors of said Captive duly adopted on the _____ day of _____, 20____; and _____, the Secretary of said Captive, further acknowledged that the corporate seal thereto attached and impressed therein is the corporate seal of said Captive and was affixed thereto by him.

IN TESTIMONY WHEREOF, I have hereunto set my hand and notarial seal this _____ day of _____, 20____.

Notary Public _____ (L.S.)

State of _____

My Commission Expires: _____